

Basic Facts Methamphetamine

What is Methamphetamine?

A drug with immense abuse potential, methamphetamine (known on the street as "speed," "meth," "crank," "crystal-meth," and "glass") is a **central nervous system stimulant of the amphetamine family**. Like cocaine, it is a powerful "upper" that produces alertness and elation, along with a variety of adverse reactions. The **effects of methamphetamine, however, are much longer lasting than the effects of cocaine**, yet the cost is much the same. For that reason, methamphetamine is sometimes called the "poor man's cocaine."

Developed by a Japanese chemist in 1919, methamphetamine was used during World War II to help soldiers stay alert and to energize factory workers. Although it is prescribed with great caution today, **it is legally available in the United States for the treatment of attention deficit disorder and obesity.**

Meth in the United States

Amphetamines first came to this country at the start of the 1930's, and abuse of amphetamine sulfate (Benzedrine) and dextroamphetamine (Dexedrine) pills became widespread during the 1950's and 60's. These pills were commonly prescribed by physicians, most often for weight loss, and massively diverted to the illicit market. Methamphetamine was also traded on the street, mostly as a powder that could be snorted or made into an injectable solution.

Injection of amphetamines dates from the 60's, when some users began shooting the drug into their veins to achieve a more intense "high." High-intensity users, who became known as "speed freaks," would often inject amphetamine for days, until overcome by exhaustion or psychosis. The aggressive behavior of these users, their volatile temper, physical depletion, and profound weight loss gave rise to the once-familiar warning that "speed kills."

By the end of the 60's, amphetamine abuse began to wane. Illicit sales dwindled after the federal government tightened controls on amphetamine production in 1970, and the Drug Enforcement Administration and medical licensing boards cracked down on "script doctors" who freely handed out amphetamine prescriptions.

A modest amount of illicit methamphetamine, however, remained available from clandestine labs in the U.S. The labs were often run by outlaw motorcycle gangs. Production concentrated in clandestine labs throughout the Western and Southwestern United States, and disputes over control of the illegal methamphetamine market became responsible for the kind of gang-related violence once restricted to the cocaine trade. Although domestic suppliers still operate, organized crime groups in Mexico

appear responsible for a **surge in methamphetamine production on both sides of the border during the 1990's.**

How is it Taken?

Methamphetamine can be swallowed, smoked, snorted, or injected. Sold as a powder, it can be mixed with water for injection or sprinkled on tobacco or marijuana and smoked. Chunks of clear, high-purity methamphetamine ("ice," "crystal," "glass"), which resemble rock candy, are smoked in a small pipe, much as "crack" cocaine is smoked. Some users exploit the rapid vaporization of methamphetamine, spreading the powdered drug on aluminum foil, heating the foil, and inhaling the fumes that are released. Others "speedball" by combining methamphetamine and heroin.

Meth tends to be taken differently in different locales and by different age groups. In San Francisco, for example, injection is the preferred route; in Honolulu, it's smoking. In Phoenix, younger users choose pills, while older users snort. Snorting the drug, however, irritates the nose, and smoking is hard on the throat and lungs. But it is smoking, along with injection, that are the fastest ways to deliver the drug to the brain. By either route of administration, users get very high very rapidly and want to recapture the feeling as soon as it begins to fade.

How Does it Affect You?

At lower doses, methamphetamine makes the user feel energetic, alert, self-confident—even powerful. With continued use these pleasurable feelings typically diminish, and most users report the need for increasingly higher doses to achieve euphoria. Under the influence of the drug, users often become agitated and feel "wired." Their behavior becomes unpredictable. They may be friendly and calm one moment, angry and terrified the next. Some feel compelled to repeat meaningless tasks, such as taking apart and reassembling bits of machinery. Others may pick at imaginary bugs on their skin.

After a number of days on methamphetamine, during which time they barely sleep or eat, users become too tired to continue or have no meth left and begin to "crash." Initially, the crash is marked by agitated depression, sometimes accompanied by an urge for more methamphetamine. But these feelings soon give way to lethargy, followed by a long deep sleep. The depression returns, however, once the user awakens, and may last for days—a time when the potential for suicide is high.

With prolonged high-dose use or long binges, stimulant psychosis may develop. The psychotic user may feel intensely paranoid, hear voices, and experience bizarre delusions, believing, for example, that other people are talking about him or following him. Methamphetamine-induced panic and psychosis can be extremely dangerous and may result in incidents of extreme violence.

It is not unusual for psychosis to persist for days after the last dose of methamphetamine. Indeed, there are many reports of users remaining paranoid, delusional, apathetic, and socially withdrawn for weeks. Occasionally, methamphetamine-related psychosis lasts for years. But, in these cases, experts believe the drug has probably triggered symptoms of a pre-existing mental disorder.

Dangers and consequences of meth use:

- Sleeplessness
- Loss of appetite and weight loss
- Nausea, vomiting, diarrhea
- Elevated body temperature
- Skin ulceration and infection, the result of picking at imaginary bugs
- Paranoia
- Depression
- Irritability
- Anxiety
- Increased blood pressure, due to the constriction of blood vessels, that may produce headaches, chest pain, or irregular heartbeat and lead to stroke or heart attack
- Seizures
- Permanent damage to brain cells caused by injury to small blood vessels serving the brain
- For pregnant women—premature labor, detachment of the placenta, and low birth weight babies with possible neurological damage, poor feeding, and lethargy
- For intravenous (IV) users—AIDS, hepatitis, infections and sores at the injection site, and infection of the heart lining and valves (endocarditis)

Meth vs. Cocaine?

Methamphetamine is generally cheaper than cocaine and—because the body metabolizes it more slowly—much longer lasting. Methamphetamine's effects may last as much as ten times longer than a cocaine high. With its long-lasting effects, methamphetamine binges may last up to a week, while cocaine binges rarely continue for more than 72 hours. When heavy cocaine users experience paranoia, it almost always disappears once the binge ends. For methamphetamine users, however, severe disturbance of mood and thought may be sustained well beyond the binge. Not infrequently, they persist for days, sometimes weeks. Similarly, the methamphetamine crash is more prolonged, and the drug-related depression some users experience upon awakening can be more severe than any experienced by cocaine users.

Courtesy of the Fort Carson Alcohol and Drug Control Office

Education and Prevention Team

What About Natural Highs?

Ephedrine, a plant product found in many over-the-counter cold remedies, is the basic ingredient of methamphetamine. It is also used to make legally-produced designer drugs with names like "**Herbal Ecstasy**" and "**Xphoria**" that are marketed to young users as safe, organic alternatives to "speed."

Although ephedrine has only limited addictive potential (and is not considered a drug when used as a dietary supplement), moderate to high doses may raise blood pressure and provoke chest pain and heart palpitations leading to stroke or heart attack. Persons with diabetes or hyperthyroidism are particularly prone to adverse reactions from ephedrine.